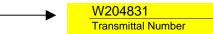
Enter your transmittal number



Your unique Transmittal Number can be accessed online: http://mass.gov/dep/service/online/trasmfrm.shtml or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

1. Please type or	Α.	Permit Information					
print. A separate Transmittal Form		BWP IW 38 1. Permit Code: 7 or 8 character code from permit instructions Sewer Connection Permit Application & Fee		Permit for Industrial Sewer User 2. Name of Permit Category			
must be completed							
for each permit					5 ,		
application.		3. Type of Project or Activity					
2. Make your							
check payable to	В.	B. Applicant Information – Firm or Individual					
the Commonwealth of Massachusetts		Lowell General Hospital					
and mail it with a		Name of Firm - Or, if party needing this approval is an individual enter name below:					
copy of this form to:		z-, p y					
DEP, P.O. Box 4062, Boston, MA		2. Last Name of Individual 3. Firs		st Name of Individual		4. MI	
02211.		295 Varnum Avenue					
		5. Street Address					
3. Three copies of		Lowell	MA	01854	(978) 937-6288	_	
this form will be needed.		6. City/Town	7. State	8. Zip Code	9. Telephone #	10. Ext. #	
		Roger Fauvel, Chief Engineer		rfauvel@lowell			
Copy 1 - the original must		11. Contact Person		12. e-mail address	s (optional)		
accompany your	_						
permit application.	C.	Facility, Site or Individual	oroval				
Copy 2 must accompany your		Lowell General Hospital					
fee payment.		Name of Facility, Site Or Individual					
Copy 3 should be		295 Varnum Avenue					
retained for your records		2. Street Address					
		Lowell	MA	01854	(978) 937-6000	_	
4. Both fee-paying		3. City/Town	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
and exempt		0.000	042-10			" (") (
applicants must mail a copy of this		8. DEP Facility Number (if Known) 9. Federal I.D. Number (if Known) 10. BWSC Tracking # (if Known)					
transmittal form to:	_	D. Application Dranged by /if different from Coation D*					
MassDEP	υ.	D. Application Prepared by (if different from Section B)*					
P.O. Box 4062 Boston, MA 02211		Watermark Environmental, Inc.					
		1. Name of Firm Or Individual					
		175 Cabot Street					
		2. Address	MA	01854	(079) 452 0606	200	
		Lowell 3. City/Town	4. State	5. Zip Code	(978) 452-9696 6. Telephone #	309 7. Ext. #	
		Justin Parisi, E.I.T.	4. State	3. Zip Code	o. releptione #	7. LXI. #	
		8. Contact Person		9. LSP Number (B)	WSC Permits only)		
		5. 25. ·································					
	E.	E. Permit - Project Coordination					
	1.	-, -					
		If yes, enter the project's EOEA file number - assigned when an					
	Environmental Notification Form is submitted to the MEPA unit:						
	_	EOEA File Number					
	F. Amount Due						
DEP Use Only	Sp	ecial Provisions:					
·	 Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less). 						
Permit No:	There are no fee exemptions for BWSC permits, regardless of applicant status.						
	2.	. Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).					
Not a Date.	3. 4.	☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10). ☐ Homeowner (according to 310 CMR 4.02).					
	٦.	_ , ,	•				
Reviewer:		7690	\$1605.00		1/11/08		
		Check Number	Dollar Amount		Date		